Congress of the United States

Washington, B.C. 20515

April 1, 2021

Christi A. Grimm Principal Deputy Inspector General U.S. Department of Health and Human Services P.O. Box 23489 Washington, DC 20026

Dear Ms. Grimm,

We write to bring your attention to apparent inconsistencies in data that dozens of Georgia nursing homes reported to the Federal government in regards to COVID-19 deaths that occurred at their facilities since May 2020. As a result, it appears possible that hundreds of Georgia nursing home COVID-19 deaths may not be included in data collected and published by the Centers for Medicare and Medicaid (CMS) and Centers for Disease Control and Prevention (CDC). As members of the Senate Special Committee on Aging and House Committee on Oversight and Reform, we are committed to protecting the wellbeing of Georgia's seniors, and ensuring that the Federal government is providing a transparent and accurate accounting of COVID-19's effect in Georgia's nursing homes. In light of the Office of Inspector General's ongoing audit of COVID-19 data reporting and collection by CMS and the CDC (W-00-20-31546), we request that you review the information we have provided below, and consider it as part of your ongoing oversight.¹

COVID-19 has had devastating effects on nursing homes across the country. To date, more than 172,000 residents have died in long-term care facilities, including at least 130,000 residents in federally certified nursing homes, accounting for roughly one in three of the pandemic's deaths to date.² These facilities, which provide care to some of the most vulnerable populations — including seniors, people with disabilities and complex medical conditions, and post-acute patients — suffered mightily as COVID-19 rapidly spread throughout the country. Georgia was no exception. Nursing homes around the state were hit hard by COVID-19, sickening both residents and staff and accounting for 25 percent of COVID-19 related deaths.³

In response to the growing COVID-19 outbreaks in these facilities, lawmakers called on CMS to provide more transparency regarding infections, deaths, staff shortages, and PPE stockpiles. The agency subsequently issued rules that required facilities to self-report information to CDC and CMS from May 8, 2020 onward on a weekly basis.⁴ Part of these requirements was to accurately report the number of COVID-19 deaths among residents and staff.

¹ https://oig.hhs.gov/reports-and-publications/workplan/summary/wp-summary-0000476.asp

² https://www.nytimes.com/interactive/2020/us/coronavirus-nursing-homes.html; https://data.cms.gov/stories/s/bkwz-xpvg

³ https://www.ajc.com/news/covid-19-toll-in-georgia-nursing-homes-obscured/XYBD3YWLLNCP5FKEODI5RDTSWE/; https://www.nytimes.com/interactive/2020/us/coronavirus-nursing-homes.html

⁴ https://www.cdc.gov/nhsn/pdfs/covid19/ltcf/cms-covid19-req-508.pdf

A review of Federal data shows there were dozens of Georgia nursing homes that reported two or fewer COVID-19 deaths to CMS and CDC.⁵ However, these same facilities reported 392 COVID-19 deaths to the Georgia Department of Public Health, as of March 2, 2021, including some that reported more than two dozen deaths to the State.⁶ For example, 41 nursing homes in Georgia reported zero COVID-19 deaths among their residents to the Federal government despite reporting more than 940 COVID-19 infections occurring in their facilities from May 2020 to February 2021. These same facilities reported 182 deaths to the State. Moreover, of the Georgia nursing homes that reported zero deaths to the Federal government, 27 reported ten or more COVID-19 infections, including one facility that reported 73 COVID-19 infections. The number of reported infections in the absence of reported deaths raises questions about the data given that research has found a nearly ten percent mortality rate for COVID-19 patients among people in their mid-70s and older.⁷

Similarly, 22 facilities reported one COVID-19 death each to the Federal government, while reporting more than 650 combined infections (one of these facilities reported 69 infections among residents). These same facilities reported 124 COVID-19 deaths to the State. Seventeen other nursing homes reported two deaths each to the Federal government while reporting 356 infections (three of these facilities reported 40 or more infections). These facilities reported 86 deaths to the State. In another instance, a single large nursing home operator, PruittHealth, appears to have underreported COVID-19 deaths among residents to the Federal government in nearly three dozen facilities. Combined, these facilities reported 1,605 COVID-19 infections and 102 COVID-19 deaths to the Federal government, while reporting 408 COVID-19 deaths to the state. One of the company's facilities in Palmrya, Georgia reported two deaths to the Federal government and 27 to the State.⁸

Such reporting irregularities are deeply concerning and warrant investigation. Accurate and timely COVID-19 data is critical if we have any hope in combatting this pandemic and returning to normalcy. It is also critical that Georgia families have an accurate picture of the effects of the pandemic on places where they entrust their loved ones. COVID-19 has exacerbated inequities in our health care system and has ravaged vulnerable communities and communities of color throughout this country and throughout Georgia. Families in Georgia and across the country want and need greater transparency in order to feel confident that their loved ones are safe.

Thank you for your prompt attention to this matter.

Sincerely,

Reverend Raphael Warnock

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United States Senator

Henry C. "Hank" Johnson, Jr.

Member of Congress

⁵ https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/

⁶ https://dch.georgia.gov/announcement/2021-03-08/long-term-care-facility-covid-19-report

⁷ https://www.nature.com/articles/d41586-020-02483-2

⁸ Id.